## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

K07-0080

		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			(COIGHIII I)		(OCIANIII E)		ŗ	RATE	FEE		RATE	FEE
						ED EVEDA	1	BASIC FEE	375.00		BASIC FEE	750.00
FOR			NUMBER FILED			ER EXTRA	ľ	SASIC FEE	373.00	OR	DAGIO I EE	730.00
TOTAL CHARGEABLE CLAIMS			5 minus 20=		* Ø			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			A minus 3 =		* Φ			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				ſ	+140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in co			olumn 2	L	TOTAL		OR	TOTAL	750
	. с	LAIMS AS A	MENDED - PART II								OTHER THAN	
		(Column 1)	1.000	(Colu		(Column 3)		SMALL ENTITY			SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	TCLAIM			+140=		OR	+280=	
							L	TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	, /	ADDIT. FEE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
P W	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM		ا ا	. 1 40		1	+280=	
		•						+140= TOTAL		OR	TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)									_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU! PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRES	ENTATION OF N	MULTIPLE DEPENDEN		NT CLAIM	1 🗆	] [			100		1
					· · · · · ·	aliana O		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEI	
*	**If the "Highest N	lumber Previously	Paid For" IN T	HIS SPACE	E is less th	ian 3, enter "3." Se bigbest numb				ox in c	olumn 1.	